

## California Child Health and Disability Prevention (CHDP) Program FACILITY REVIEW SCORING SUMMARY SHEET

Review date	Provider name	Provider address (number, street)	City
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**INSTRUCTIONS:** Transfer point totals from the CHDP Facility Review Tool (DHCS 4493) for each Survey Criteria Section. Mark each Critical Element (CE) as pass, fail, or conditional. Add up point totals. Then follow the instructions for scoring on the Facility Review Tool.

Please note that the local CHDP Program may complete a modified Facility Review in specific situations. Modified Facility Reviews of CHDP Providers during application for enrollment or during periodic reviews of enrolled providers may be conducted when the local CHDP Program has a copy or summary of scores and conclusions from a survey conducted within the preceding 12 months by the CDHS Medi-Cal Managed Care Division or health plan.

A modified Facility Review is a review of the five CEs and all of the criteria within the CE in the Facility Review Tool. This scoring summary shows these as shaded entries. Use the face page and the pages of the Facility Review Tool with the CEs to complete the modified review.

Survey Criteria	Maximum Possible	Points Scored or Pass, Fail, or Conditional
<b>1. Personnel</b>		
<b>Site Personnel Survey Criteria</b>		
A. Professional licenses and certifications are current for all health care practitioners at the provider site.	CE	
B. Health care personnel are properly identified.	2	
C. All staff members are qualified and trained for assigned responsibilities.	7	
D. There are written policies and procedures for safety and client rights.	1	
E. There is written documentation of annual training on safety and client rights.	1	
<b>Section Total:</b>	11/CE	
<b>2. Office Management</b>		
<b>Office Management Survey Criteria</b>		
A. Physician coverage is available.	3	
B. Readily available health care services are provided.	6	
C. Interpreter services are provided for limited-English proficient clients.	2	
D. Referral/consultative services are handled according to established site-specific procedures.	6	
E. Medical records are readily retrievable for the Provider at each scheduled client encounter.	2	
F. Client confidentiality and privacy are maintained.	3	
<b>Section Total:</b>	22	

Survey Criteria	Maximum Possible	Points Scored or Pass, Fail, Conditional
<b>3. Health Education Services</b>		
<b>Health Education Survey Criteria</b>		
A. Health education services are available to clients.		
<b>Section Total:</b>	10	
<b>4. Site Access/Safety Services</b>		
<b>Site Access/Safety Survey Criteria</b>		
A. Site is accessible and useable by persons with disabilities.	2	
B. The provider site shows evidence of safety and fire precautions.	3	
C. Site ensures that the following are in place in order to provide emergency care during business hours until treatment is initiated by the Emergency Medical Services (EMS) system.		
1. <b>Airway, breathing, circulatory management:</b> oxygen delivery system, bag-valve mask (pediatric and adult); suction device (tonsil tip, bulb syringe). Clear oxygen masks, breather and nonrebreather, with reservoirs (infant, child, adult) nebulizer (or metered-dose inhaler with spacer/mask); oropharyngeal airways (sizes 00-5); cardiac arrest board/backboard.	CE	
2. <b>Emergency medication and administration:</b> Epinephrine 1:1,000 (injectable subcutaneous or intramuscular); tuberculin syringes and needles; alcohol wipes; albuterol for inhalation (metered-dose inhaler with spacer or mask may be substituted).	CE	
3. <b>Equipment and supplies</b> – splints and sterile dressings.	CE	
4. <b>Written plan</b> delineating the procedures followed for an emergency medical condition, including activation of the local 911 EMS system.	CE	
5. <b>Medication dosage chart</b> (or other method for determining dosage) is kept with emergency medication(s).	CE	
6. Emergency equipment/supplies as listed in items 1 and 2 above are stored together and there are no obstructions (e.g., furniture, supplies) to their use.	1	
7. There is written documentation that emergency equipment/supplies as listed in items 1 and 2 above are checked for expiration at least monthly and replaced/restocked as needed; emergency equipment is checked for operating status at least monthly.	1	
<b>Section Total:</b>	7/CE	

<b>4. Site Access/Safety Services – Cont.</b>		<b>Maximum Possible</b>	<b>Points Scored or Pass, Fail, Conditional</b>
8.	At least one staff person has a current cardiopulmonary resuscitation (CPR) certificate and is on-site during business hours.	1	
9.	Local poison control number is prominently posted and visible for staff.	1	
<b>Section Total:</b>		7/CE	
<b>5. Infection Control/ Laboratory Survey Criteria</b>			
<b>Infection Control/Lab Survey Criteria</b>			
A.	Provider has a CLIA certificate that is current and site-specific.	CE	
1.	CHDP tests performed on site are appropriate to the CLIA status, process in place for equipment maintenance, expiration of supplies.	4	
2.	Measures are in place to prevent transmission of infections among clients and staff.	4	
3.	Measures are in place to decrease clients' and staffs' exposure to blood borne pathogens.	4	
<b>Section Total:</b>		12/CE	
<b>6. Clinical Services</b>			
<b>Pharmaceutical Services Survey Criteria</b>			
A.	The provider site participates in the Vaccines for Children (VFC) program and meets all requirements.	CE	
<b>7. Pediatric Preventive Services</b>			
A.	Pediatric preventive health care services and health appraisal examinations are provided on a periodic basis for the detection of asymptomatic diseases.  Examination equipment appropriate for infants, children, and adolescents is available on-site and maintained according to manufacturer's guidelines.	CE	
<b>Grand Total:</b>		62	
<b>Percent Compliance:</b>			

Approval status: ☐ Full approval (85% through 100%) ☐ Conditional approval (70% through 84%) ☐ Not approved (Less than 70%)